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JUL 23 2004

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23307 7590 04/21/2004

SYNNESTVEDT & LECHNER, LLP
 2600 ARAMARK TOWER
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Barbara G. Makariou

(Depositor's name)

Barbara G. Makariou

(Signature)

July 21, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/982,018	10/19/2001	Dong Huang	P444 0003	7140

TITLE OF INVENTION: NOVEL DAMMARANE SAPOGENINS, THEIR USE AS ANTI-CANCER AGENTS, AND A PROCESS FOR PRODUCING SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	07/21/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
QAZI, SABIHA NAIM	1616	552-502000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Synnestvedt & Lechner LLP

2 _____

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

PanaGin Pharmaceuticals, Inc.

Richmond, British Columbia, Canada

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

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☒ Issue Fee☒ A check in the amount of the fee(s) is enclosed.☒ Publication Fee☐ Payment by credit card. Form PTO-2038 is attached.☒ Advance Order - # of Copies 10☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-5425 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

July 21, 2004

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07/26/2004 RMEBRAH1 00000068 195425 09982018

01 FC:2501

665.00 OP

02 FC:1504

300.00 OP

03 FC:8001

30.00 DA

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